



**Dan Bucks**  
Director

# Montana Department of Revenue



**Brian Schweitzer**  
Governor

## **CREDIT FORM** **FOR DEFECTIVE MERCHANDISE/TRANSPORTATION BREAKAGE/SHORTAGE**

Store #: \_\_\_\_\_ City: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

**NOTE:** Please fax completed form to (800) 332-6135, Option 3-1

Invoice Rec'd On	NABCA Number			Item Description	Qty (Units)	Adj Code

**OFFICE USE ONLY:**

**Total Units**

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_ Invoice Applied to: \_\_\_\_\_

White and Canary copy to Central Office, Pink copy retained by Agent